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PTO/SB/01 (12-97)  
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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing <b>OR</b> <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	<b>Attorney Docket Number</b>	1/1161
	<b>First Named Inventor</b>	Rainer WALTER
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	10 / 002,939
	<b>Filing Date</b>	11/01/2001
	<b>Group Art Unit</b>	
	<b>Examiner Name</b>	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**NEW SUBSTITUTED INDOLINONES, PREPARATION THEREOF AND THEIR USE AS PHARMACEUTICAL COMPOSITIONS**

the specification of which  
☐ is attached hereto  
OR  
☒ was filed on (MM/DD/YYYY) **November 1, 2001** as United States Application Number or PCT International Application Number **10/002,939** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
DE 100 54 019.8	Germany	11/01/2000	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/251,055	12/01/2000

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

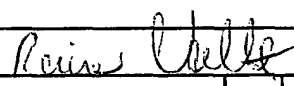
Name	Registration Number	Name	Registration Number
Robert P. Raymond	25,089	Susan K. Pocchiari	45,016
Alan R. Stempel	28,991	Philip I. Datlow	41,482
Mary-Ellen M. Devlin	27,928	Timothy X. Witkowski	40,232
Anthony P. Bottino	41,629		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label  OR ☐ Correspondence address below

Name	28501		
Address	PATENT TRADEMARK OFFICE		
Address			
City	State	ZIP	
Country	Telephone	Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))	Family Name or Surname		
Rainer	WALTER		
Inventor's Signature			Date 01/15/2002
Residence: City	Biberach	State	Country Germany
Post Office Address	Probststrasse 3		
Post Office Address			
City	Biberach	State	ZIP 88400
Country	Germany		

☒ Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> Page <u>1</u> of <u>3</u>
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Armin				HECKEL			
Inventor's Signature						Date	1/15/02
Residence: City	Biberach	State		Country	Germany	Citizenship	DE
Post Office Address: Geschwister-Scholl-Str. 71							
Post Office Address:							
City	Biberach	State		ZIP	88400	Country	Germany
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Gerald				ROTH			
Inventor's Signature						Date	01/05/02
Residence: City	Biberach	State		Country	Germany	Citizenship	DE
Post Office Address: Akazienweg 47							
Post Office Address:							
City	Biberach	State		ZIP	88400	Country	Germany
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Joerg				KLEY			
Inventor's Signature						Date	01/14/02
Residence: City	Mittelbiberach	State		Country	Germany	Citizenship	DE
Post Office Address: Poststrasse 5/4							
Post Office Address:							
City	Mittelbiberach	State		ZIP	88441	Country	Germany

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S) Supplemental Sheet</b> Page <u>2</u> of <u>3</u>
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Gisela				SCHNAPP			
Inventor's Signature	<i>G. Schnapp</i>					Date	25/10/02
Residence: City	Biberach	State		Country	Germany	Citizenship	DE
Post Office Address	Esterbuch 5						
Post Office Address							
City	Biberach	State		ZIP	88400	Country	Germany
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Martin				LENTER			
Inventor's Signature	<i>[Signature]</i>					Date	17/10/02
Residence: City	Ulm	State		Country	Germany	Citizenship	DE
Post Office Address	Promenade 23						
Post Office Address							
City	Ulm	State		ZIP	89073	Country	Germany
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Jacobus				VAN MEEL			
Inventor's Signature	<i>[Signature]</i>					Date	26/04/02
Residence: City	Moedling	State		Country	Austria	Citizenship	NL
Post Office Address	Weisses Kreuz Gasse 61						
Post Office Address							
City	Moedling	State		ZIP	2340	Country	Austria

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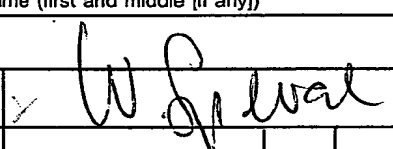
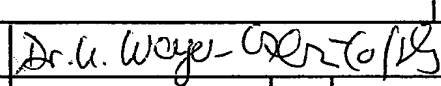
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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> Page <u>3</u> of <u>3</u>
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Walter				SPEVAK			
Inventor's Signature						Date	6/26/02
Residence: City	Oberrohrbach	State		Country	Austria	Citizenship	AT
Post Office Address	Leoberndorferstr. 36						
Post Office Address							
City	Oberrohrbach	State		ZIP	2105	Country	Austria
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Ulrike				WEYER-CZERNILOFSKY			
Inventor's Signature						Date	26.2.02
Residence: City	Baden	State		Country	Austria	Citizenship	DE
Post Office Address	Klesheimerstr. 28						
Post Office Address							
City	Baden	State		ZIP	2500	Country	Austria
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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